PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(571) 273-2885



INSTRUCTIONS: This for appropriate. All further cor indicated unless corrected to maintenance fee notification	below or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and Prders and notifi a) specifying a	UBLICATION FEE (if requirements of maintenance fees new correspondence address	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sep-	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23373 7590 12/05/2005 SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, N.W. SUITE 800 WASHINGTON, DC 20037 1/10/2006 FBEYENE2 0000035 10705517				C	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
1/10/2006 HBEYENE2 00000033 10705617						(Depositor's name)	
l FC:1501 2 FC:1504	1400.60 UP 300.00 EP		DEM			(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAMED INV		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/705,817	11/13/2003	-	Liang I	Oong	A8637	7847	
TITLE OF INVENTION: O							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700 _	03/06/2006	
EXAMINER ART			IIT	CLASS-SUBCLASS]	•	
PAK, SUNG H 28				385-046000			
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 c Number is required. ASSIGNEE NAME AND		Correspondence ution form of a Customer E PRINTED ON T	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNI		,	B) RESIDENCE: (CITY and STATE OR COUNTRY)				
IMRA America, Inc. Ann Arbor, Michigan							
Please check the appropriate a. The following fee(s) are			inted on the part. D. Payment of F		Corporation or other private gr	oup entity Government	
Ssue Fee Publication Fee (No si Advance Order - # of	mall entity discount permitte	,	A check is attached for the NOA Fees payment. Please charge any payment deficiency and credit overpayment to PODA 19-4880. A duplicate carry of this form is attached.				
	(from status indicated above MALL ENTITY status. See	,	— b. Applica	nt is no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO in NOTE: The Issue Fee and Punterest as shown by the reco	is requested to apply the Issu ablication Fee (if required) verds of the United States Pate	e Fee and Publicate vill not be accepted and Trademark	tion Fee (if any 1 from anyone o Office.) or to re-apply any previous other than the applicant; a reg	ly paid issue fee to the applications and attorney or agent; or the	ation identified above. he assignee or other party in	
Authorized Signature		hr		Date	12/23/05		
Typed or printed name Richard C. Turner Registration No. 29, 710							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.